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	to be used for	all correspo	ondence after initial	filing)	Art Unit					
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Application Number	10/666,568
Filing Date	September 19, 2003
First Named Inventor	CHANDRA et. al.
Art Unit	<u>''</u>
Examiner Name	
Attorney Docket Number	

I hereby revoke all previ	I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith.							
OR  I hereby appoint the practitioners associated with the Customer Number:  30448							
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  30448							
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I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
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Art Unit	
Examiner Name	
Attorney Docket Number	7668-4

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Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Name	Joel	M. Fure	Υ					
Signature	21-	m I	-	-				
Date	1/19/	04		Te	elephone	802-2	53-	2212
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